PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

202330028/2

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
[=0	TAL OLANGO		(Column 1)		(Column 2)		7	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20minus 20=		* o			X\$ 9=		OR	X\$18=	` .
INDEPENDENT CLAIMS			6 minus 3 =		3			X40=	120	OR	X80=	-
MU	LTIPLE DEPEN	RESENT	ESENT				+135=		OR	+270=		
* If the difference in column 1 is less that				s than zero, enter "0" in co			Į <u>.</u>	TOTAL	47-5	OR	TOTAL	
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN
		(Column 1)	(Colun			(Column 3)		SMALL	YTITM	OR	SMALL	ENTITY
AMENDWENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	AITATION OF M	Minus			=		X40=		OR	X80=	ح"
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL	
										J • · · ·	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI												
ENT B	·	REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	T OL AUA]=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									00	+270=	
								+135=		OR	TOTAL	
										OR	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C	۰	CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			1270	
	If the entry in colu	ımn 1 is lees than t	the entry in colu	ımn 2 wri	te "0" in co	olumn 3.	į	+135=		OR	+270=	<u> </u>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	aid For" (Total o	r Indepen	dent) is th	e highest numbe	er fou	and in the app	oropriate bo	x in co	lumn 1.	